

ORAL HEALTH STATE PLAN REVIEW INDEX

CENTERS FOR DISEASE CONTROL AND PREVENTION
NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION
DIVISION OF ORAL HEALTH
(April 2003)

[STATE] State:

Review Date:

[REVM] [REYV]

[NAME] Name of Plan:

Publication Date:

[PUBM]

[PUBYR]

Development start date:

[TIME]

_____ State oral health plan [StatePlan]

_____ 2010 plan [HPPlan]

Funding source:

[Fund]

_____ On state-DOH website [web]

NGA Academy:

[nga]

[NGAYr]

Reviewer: _____

ASTDD Program Report: Y/N

[ASTDDrep]

SECTION I. Stakeholder Involvement

- ☐ 1. Key stakeholders were involved throughout the plan development process: [Stake]
- ☐ a. NGA team [s_nga]
 - ☐ b. Government [s_gov]
 - ☐ c. Coalition [s_coal]
 - ☐ d. Community [s_comm.]
 - ☐ e. Education [s_edu]
 - ☐ f. Providers [s_prov]
 - ☐ g. Public [s_pub]
 - ☐ h. Third-party payers (including Medicaid) [s_third]
 - ☐ i. Higher-education [s_high]
 - ☐ j. Other chronic disease representation [s_chronic]
 - ☐ k. Drinking water/EPA/Fluoridation [s_drink]
 - ☐ l. 2010 teams [s_hp]
 - ☐ m. Not able to identify [s_not]
 - ☐ n. State Department of Health and Human Services [s_doh]
 - ☐ o. Others specify: _____ [s_others]

NOTES:

SECTION II. Plan is Evidence Based

- ☐ 1. State-level burden of oral health disease describe and/or reference burden document [S2_1]
(If referenced, include copy and source information with plan)
- ☐ 2. Priority populations based on epidemiologic data [S2_2]
- ☐ 3. Priorities based upon assessment of existing infrastructure, resources, and gaps [S2_3]
- ☐ 4. Healthy People 2010 objectives [S2_4]

Oral Health Chapter

- ☐ 21-1 Dental caries experience [HP21_1]
- ☐ 21-2 Untreated dental decay [HP21_2]
- ☐ 21-3 No permanent tooth loss [HP21_3]
- ☐ 21-4 Complete tooth loss [HP21_4]
- ☐ 21-5 Periodontal diseases [HP21_5]
- ☐ 21-6 Early detection of oral and pharyngeal cancer [HP21_6]
- ☐ 21-7 Annual examinations for oral and pharyngeal cancer [HP21_7]
- ☐ 21-8 Dental sealants [HP21_8]
- ☐ 21-9 Community water fluoridation [HP21_9]
- ☐ 21-10 Use of oral health care system [HP21_10]
- ☐ 21-11 Use of oral health care system by residents in long-term care facilities [HP21_11]
- ☐ 21-12 Dental services for low-income children [HP21_12]
- ☐ 21-13 School based health centers with oral health component [HP21_13]
- ☐ 21-14 Health centers with oral health service components [HP21_14]
- ☐ 21-15 Referral for cleft lip or palate [HP21_15]
- ☐ 21-16 State-based surveillance system [HP21_16]

- ☐ 21-17 Tribal, state and local dental programs [HP21_17]
- ☐ *Oral Cancer Objective*
3-6 Reduce the oropharyngeal cancer death rate [HP3_6]
- ☐ *Diabetes Chapter Objective*
5-15 Increase the proportion of persons with diabetes who have at least an annual dental examination [HP5_15]
- ☐ *Public Health Infrastructure chapter*
23-2 Made information available to public in the past year on leading health indicators [HP23_2]
- ☐ 23-4 Population-based HP 2010 objectives with national data for all population groups [HP23_4]
- ☐ 23-8 Specific competencies essential to public health services into personnel systems [HP23_8]
- ☐ 23-11 Meet national performance standards for public health services [HP23_11]
- ☐ 23-12 Local jurisdictions with health improvement plan linked to state plan [HP23_12]
- ☐ 23-14 Provide or assure comprehensive epidemiology services to support essential PHS [HP23_14]
- ☐ 23-15 Review and evaluate the extent to which statutes, ordinances, and bylaws assure deliver of essential PHS [HP23_15]
- ☐ 23-16 Documentation of public health expenditures, categorized by essential PHS [HP23_16]

☐ 5. Reference Surgeon General's report [SGRepor]

☐ 6. Address Core public health functions [S2_6]

- ☐ a. Assessment [Core_assess]
- ☐ b. Policy Development [Core_policy]
- ☐ c. Assurance [Core_assur]

☐ 7. Five-points of Call to Action [S2_7]

- ☐ a. Change perception of oral health [call_chg]
- ☐ b. Overcome barriers to implement what works [call_over]
- ☐ c. Build a balanced science base [call_build]

- ☐ d. Increase oral health workforce [call_inc]
 - ☐ e. Join forces to fix problems [call_join]
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SECTION III Plan Framework

- ☐ 1. Plan is based on state-wide goals and objectives [S3_1]
- ☐ 2. Plan reflects a solid "call-to-action" [S3_2]
- ☐ 3. Plan includes a summary statement [S3_3]
- ☐ 4. Plan is well-organized [S3_4]
- ☐ 5. Plan is easy to read [S3_5]
- ☐ 6. Plan has identified clear, definable, goals [S3_6]
 - ☐ a. Goals project for at least a 5 year time frame [S3_6A]
 - ☐ b. Goals emphasize infrastructure development for sustained achievements [S3_6B]
 - ☐ c. Goals address system changes [S3_6C]
 - ☐ d. Goals are realistic for the environment [S3_6D]
 - ☐ e. Strategies are based upon environmental assessment [S3_6E]
- ☐ 7. Plan has identified clear, definable, objectives or action steps [S3_7]
 - ☐ a. Objectives/action steps are realistic towards the accomplishment of goals [S3_7A]
 - ☐ b. Objectives/action steps include identification of person(s)/organization(s) [S3_7B] responsible for implementation
 - ☐ c. Objectives/action steps include identification of resources needed to accomplish [S3_7C]

☐ d. Objectives/action steps are defined in S.M.A.R.T. format [S3_7D]

☐ i. Specific [S2_7D1]

☐ ii. Measurable [S2_7D2]

☐ iii. Attainable [S2_7D3]

☐ iv. Results oriented [S2_7D4]

☐ v. Time-phased [S2_7D5]

☐ 8. Plan goals and objectives integrate with other chronic disease areas including strategies to partner and leverage resources [S3_8]

☐ 9. Plan is published for public consumption [S3_9]

☐ 10. Plan is posted on state website [S3_10]

SECTION IV. Strategies and Programs

☐ 1. Plan addresses access [S4_1]

☐ a. Provide approximate percentage of plan devoted to access issues [S4_1A]

Number of objectives or items discussed in plan _____

Number of objectives or items devoted to access _____

Number of objectives or items devoted to prevention _____

☐ b. Access for children [S4_1B]

☐ c. Access for adults [S4_1C]

☐ d. Access for seniors [S4_1D]

☐ e. Access for populations experiencing disparity [S4_1E]

☐ f. Access for low-income populations [S4_1F]

☐ g. Increase number of dental schools [S4_1G]

- ☐ h. Increase number of hygiene/technical schools [S4_1H]
- ☐ i. Loan repayment program [S4_1I]
- ☐ j. Increase workforce [S4_1J]
- ☐ k. Identification of alternative providers [S4_1K]
- ☐ l. Practice act/expanded duties [S4_1L]
- ☐ m. Mandates and/or policy change [S4_1M]
- ☐ n. Increase reimbursement issues (Medicaid/SCHP) [S4_1N]
- ☐ o. Equipment/buildings [S4_1O]
- ☐ p. Increase public health in existing schools [S4_1P]
- ☐ q. Increase pediatric dentistry and/or residency [S4_1Q]
- ☐ r. Licensure issues [S4_1R]
- ☐ s. Referral networks [S4_1S]
- ☐ t. Safety nets [S4_1T]
- ☐ u. Residency training, other training for working with high risk populations [S4_1U]
- ☐ v. Coordinate management or system of care[S4_1V]
- ☐ w. Private insurance [S4_1W]
- ☐ x. Increase number of students in dental school [S4_1X]
- ☐ y. Increase number of students in hygiene or technical school [S4_1Y]

NOTES:

- ☐ 2. Plan addresses proven prevention strategies [S4_2]
- ☐ a. Provide approximate percentage of plan devoted to prevention issues [S4_2A]
- ☐ b. Fluoridation [S4_2B]
- ☐ i. Water fluoridation [S4_2B1]
- ☐ ii. Mouthrinse and/or tablet program [S4_2B2]
- ☐ iii. Awareness campaigns [S4_2B3]
- ☐ iv. Legislative issues [S4_2B4]
- ☐ v. Varnish programs [S4_2B5]
- ☐ vi. Water testing [S4_2B6]
- ☐ c. School-based, school-linked sealant programs [S4_2C]
- ☐ d. Community-based sealant programs [S4_2D]
- ☐ 3. Plan addresses education and/or awareness programs [S4_3]
- ☐ a. Public awareness [S4_3A]
- ☐ i. Provide name of program
- ☐ b. Policy maker outreach [S4_3B]
- ☐ c. In non-traditional settings [S4_3C]
- ☐ d. Provider training and/or awareness programs [S4_3D]
- ☐ e. School-based education [S4_3E]
- ☐ 4. Plan addresses state-wide summit (explain if other type meeting) [S4_4]

- ☐ 5. Plan addresses caries [S4_5]
 - ☐ a. Experience [S4_5A]
 - ☐ b. Untreated decay [S4_5B]
 - ☐ c. ECC [S4_5C]
 - ☐ d. In children [S4_5D]
 - ☐ e. In youth [S4_5E]
 - ☐ f. In adults [S4_5F]
 - ☐ g. In seniors [S4_5G]
- ☐ 6. Plan addresses periodontal disease [S4_6]
- ☐ 7. Plan addresses oral cancer [S4_7]
 - ☐ a. Early detection [S4_7A]
 - ☐ b. Awareness/education programs [S4_7B]
 - ☐ c. Coordination with tobacco/cancer programs [S4_7C]
- ☐ 8. Plan addresses infection control issues [S4_8]
- ☐ 9. Plan addresses policy and systems change [S4_9]
 - ☐ a. Practice act [S4_9A]
 - ☐ b. General policy issues [S4_9B]
 - ☐ c. Mandatory screening [S4_9C]
 - ☐ d. Increase in Medicaid reimbursement [S4_9D]
 - ☐ e. Change in Medicaid filing requirements [S4_9E]

- ☐ 10. Plan addresses surveillance [S4_10]
 - ☐ a. Plan specifies state data sources [S4_10A]
 - ☐ b. Plan addresses expansion of surveillance efforts [S4_10B]
 - ☐ c. Plan addresses infrastructure needed to support surveillance [S4_10C]
 - ☐ d. Plan addresses fluoridation surveillance [S4_10D]
 - ☐ e. Program surveillance [S4_10E]
 - ☐ f. School or state needs assessment [S4_10F]
- ☐ 11. Plan addresses issues related to the integration of oral health with overall health [S4_11]
- ☐ 12. Plan addresses infrastructure development [S4_12]
- ☐ 13. Plan addresses issues of sustainability of program and/or infrastructure [S4_13]
- ☐ 14. Oral and facial injuries [S4_14]
 - ☐ a. Face masks [S4_14A]
 - ☐ b. Mouth guards [S4_14B]
 - ☐ c. Awareness [S4_14C]

NOTES:

SECTION V. Partnerships

- ☐ 1. Plan addresses partnerships with other chronic disease areas: [S5_1]
- ☐ a. Diabetes [S5_1A]
 - ☐ b. Tobacco [S5_1B]
 - ☐ c. Violence/Injury [S5_1C]
 - ☐ d. Early childhood [S5_1D]
 - ☐ e. Maternal and child health [S5_1E]
 - ☐ f. Cancer [S5_1F]
 - ☐ g. Cardiovascular [S5_1G]
 - ☐ h. Health promotion [S5_1H]
 - ☐ i. Coordinated school health [S5_1I]
- ☐ 2. Plan addresses partnerships with other department of health and/or government agencies [S5_2]
- ☐ a. Board of education [S5_2A]
 - ☐ b. Department of education [S5_2B]
 - ☐ c. Medicaid [S5_2C]
 - ☐ d. WIC [S5_2D]
 - ☐ e. Head Start [S5_2E]
 - ☐ f. Drinking water [S5_2F]
 - ☐ g. EPA [S5_2G]
 - ☐ h. Schools in general [S5_2H]
 - ☐ i. Dental schools, research, hygiene schools [S5_2I]

- ☐ 3. Plan describes technical assistance to be provided to partners to assist in the implementation of the plan [S5_3]
 - ☐ 4. Business, local industry [S5_4]
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SECTION VI. Implementation

- ☐ 1. Plan identifies person(s) and organization(s) responsible for implementation of objectives/action steps [S6_1]
 - ☐ 2. Plan identifies technical assistance to be provided to partners to assist in the implementation of the plan [S6_2]
 - ☐ 3. Plan addresses sustainability of programs and health achievements [S6_3]
 - ☐ 4. Plan addresses resources needed to implement the plan [S6_4]
 - ☐ 5. Plan describes strategies for obtaining needed resources [S6_5]
 - ☐ 6. Plan describes clear, realistic dissemination plan [S6-6]
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SECTION VII. Evaluation

- ☐ 1. Plan has identified evaluation strategies for goals and objectives [S7_1]
 - ☐ a. Evaluation strategies include measurable markers [S7_1A]
- ☐ 2. Plan identifies evaluation of dissemination strategies [S7_2]
- ☐ 3. Plan includes logic mode [S7_3]
- ☐ 4. Plan identifies potential outcomes and unintended effects [S7_4]
- ☐ 5. Plan includes system for using evaluation results to update plan strategies to promote great health gains [S7_5]
- ☐ 6. Plan identifies need for outside evaluation assistance [S7_6]
- ☐ 7. Describes need for monitoring implementation [S7_7]